DOCUMENT # P00000085499

1. Entity Name

REY DESIGN GROUP, INC.



Principal Place of Business

200 LINDELL BLVD.

917A

DELRAY BEACH, FL 33483

Mailing Address

200 LINDELL BLVD.

917A

DELRAY BEACH, FL 33483

FILED Apr 21, 2005 08:00 AM Secretary of State



DO	NOT	WRITE	IN	THIS	SPACE

6. Name and Address of Current Registered Agent

02232005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1042740 Applied For Not Applicable

5. Certificate of Status Desired

\$8,75 Additional Fee Required

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HERNANDEZ, REINALDO 311 OREGON LANE		 DO NOT WRITE
BOCA RATON, FL 33487		IN THIS SPACE

VARIOUS ESTABLISHED TO A STATE OF THE STATE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.			cing 🔲	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CRY-ST-ZIP	PTD HERNANDEZ, REINALDO 311 OREGON LANE BOCA RATON, FL 33487				100000319755			
TITLE NAME STREET ADDRESS CITY-SY-ZIP	SVD HERNANDEZ, KARIN 311 OREGON LANE BOCA RATON, FL 33487				0000003197\$\$ 04/21/05-80009-024 150.00			
TITLE NAME STREET ADDRESS CITY - ST - ZIP				DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE					
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Ì			•			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, i further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or truetee empoward to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP